## PART B - FEE(S) TRANSMITTAL

te and septemble description to the second septemble fee(s), to: Mail Mail Stop ISSUE FEE
Commissioner for Patents
P.O. Box 1450
Alexandria, Virginia 22313-1450
or Fax (571)-273-2885

INSTRUCTIONS: This appropriate. All further indicated unless correcte maintenance fee notifical	form should be used to	for transmitting the ISSU ng the Patent, advance on herwise in Block 1, by (a	JE FEE and PUBLICATION (a) specifying a new co	ATION FEE (if request of maintenance fees verespondence address;	ired). E vill be i ; and/or	Blocks 1 through 5 sh mailed to the current r (b) indicating a sepa	nould be completed where correspondence address as rate "FEE ADDRESS" for
CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)				Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.			
25944							
OLIFF & BERRIDGE, PLC				Cer hereby certify that th	tificate is Fee(s	e of Mailing or Transr s) Transmittal is being	nission deposited with the United
P.O. BOX 320850				tates Postal Service v	vith suf	ficient postage for firs	t class mail in an envelope
ALEXANDRIA, VA 22320-4850				ransmitted to the USP	TO (57	1) 273-2885, on the da	deposited with the United t class mail in an envelope above, or being facsimile ate indicated below.
				(Depositor's name) (Signature)			
¥.							(Date)
APPLICATION NO. FILING DATE		FIRST NAMED INVENTOR		ATTORNEY DOCKET NO.		CONFIRMATION NO.	
10/642,627 08/19/2003			Rolf Stefani			113391	3795
TITLE OF INVENTION	SECURITY MESSEN	GER SYSTEM					
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DU	JE PREV. PAID ISSU	E FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1440	\$300	\$0		\$1740	08/14/2008
EXAMINER		ART UNIT	CLASS-SUBCLASS				
DESIR, PIEF	RRE LOUIS	455-431000					
1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).  2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys 1 Oliff & Berridge, PLC							
Change of correspondences form PTO/SE	ondence address (or Cha 3/122) attached.	or agents OR, altern	alternatively,				
"Fee Address" indi	cation (or "Fee Address 2 or more recent) attach	registered attorney	single firm (having as a member a by or agent) and the names of up to attattorneys or agents. If no name is sill be printed.				
3. ASSIGNEE NAME A	ND RESIDENCE DATA	A TO BE PRINTED ON	THE PATENT (print or	type)			
PLEASE NOTE: Unless an assignce is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.							
(A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)							
· ADTNO T							
ARINC Inc.  Annapolis, Maryland  Please check the appropriate assignce category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government							
4a. The following fee(s) are submitted:  4b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above)							
				ed/check no. 206283 \$1740			
Publication Fee (No small entity discount permitted)				it card. Form PTO-2038 is attached.  ereby authorized to charge the required fee(s), any deficiency, or credit any Deposit Account Number 15-0461 (enclose an extra copy of this form).			
Advance Order - # of Copies EkThe Director is he overpayment, to D				eby authorized to char eposit Account Numb	rge the i	required fee(s), any def -0461 (enclose ar	n extra copy of this form).
	us (from status indicates SMALL ENTITY state		D. A	land a state of the Children		FITTY A A - G - 27 CF	SD 1 27( )(2)
						FITY status. See 37 CF	
interest as shown by the r	ecords of the United Sta	ites Patent and Trademark	Office.	in the applicant; a regi	istered a	•	e assignee or other party in
Authorized Signature	10/3			<u>une 3</u>	10002 0000013 1 , 2008	.0642627 	
Typed or printed name Kirk D. Berkhimer				01 FU:1 Registration:1	v634	59,874	369.99 OP
This collection of information application. Confident submitting the completed	ation is required by 37 C iality is governed by 35 application form to the	CFR 1.311. The information U.S.C. 122 and 37 CFR USPTO. Time will vary	on is required to obtain 1.14. This collection is depending upon the in	or retain a benefit by the estimated to take 12 dividual case. Any co	the publ minutes omment	lic which is to file (and to complete, includin is on the amount of tin	by the USPTO to process) g gathering, preparing, and ne you require to complete

this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.